

*Examiners' report*

INCLUDED ON THE  
KS4 PERFORMANCE TABLES

OCR Level 1/Level 2

Cambridge National in  
**Health and Social Care**

**J835**

For first teaching in 2022 | Version 1

**R032 Summer 2024 series**

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# Contents

Introduction .....	3
R032 series overview .....	4
Question 1 (a) .....	5
Question 1 (b) .....	5
Question 1 (c) .....	6
Question 1 (d) .....	7
Question 2 (a) .....	8
Question 2 (b) .....	9
Question 2 (c) .....	9
Question 3 (a) .....	10
Question 3 (b) .....	11
Question 3 (c) .....	11
Question 3 (d) .....	12
Question 4 (a) (i) .....	13
Question 4 (a) (ii) .....	13
Question 4 (b) .....	14
Question 5 (a) .....	15
Question 5 (b) .....	15
Question 5 (c) .....	16
Question 5 (d) .....	16
Question 6 (a) .....	18
Question 6 (b) .....	18

## Introduction

Our examiners' reports are produced to offer constructive feedback on candidates' performance in the examinations. They provide useful guidance for future candidates.

The reports will include a general commentary on candidates' performance, identify technical aspects examined in the questions and highlight good performance and where performance could be improved. A selection of candidate answers is also provided. The reports will also explain aspects which caused difficulty and why the difficulties arose, whether through a lack of knowledge, poor examination technique, or any other identifiable and explainable reason.

Where overall performance on a question/question part was considered good, with no particular areas to highlight, these questions have not been included in the report.

A full copy of the question paper and the mark scheme can be downloaded from OCR.

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## R032 series overview

Most candidates were able to access all of the questions on the paper. The extended response questions proved to be the most challenging for some candidates whose answers did not fulfil the command verb, resulting in lower marks as the answers provided did not meet the full requirements.

Candidates achieved a full range of marks demonstrating the paper's accessibility and level of demand. There were few 'no responses' as most candidates were able to attempt all of the questions without running out of time.

Many candidates were very well prepared for the new topics such as the '6Cs', safeguarding and person-centred values and were able to write confidently about them.

Candidates who did well on this paper generally:	Candidates who did less well on this paper generally:
<ul style="list-style-type: none"> <li>demonstrated an understanding and familiarity with the different command verbs, e.g. state, identify, describe, outline, explain, analyse</li> <li>paragraphed their longer responses enabling them to produce well organised, focused answers</li> <li>gave detailed and developed answers</li> <li>have a good understanding of why risk assessments are carried out. – Q4 (b)</li> <li>made sure that their responses to questions related to any context or scenario provided, e.g. Q1 Day Centre, Q2 retirement home, Q3 Hospital Social Worker.</li> </ul>	<ul style="list-style-type: none"> <li>gave answers that lacked detail, giving answers worth only 1 mark so they did not gain the second mark, e.g. Q1 (c), Q2 (a), Q3 (a), Q4 (b), Q5 (c)</li> <li>not reading the question carefully enough, e.g:</li> <li>Q3 (a) some candidates missed the fact that the question asks for one example described, not to identify two</li> <li>Q3 (c) the question is about benefits for hospital staff not patients</li> <li>Q3 (d) required emotional effects only, not physical, or social.</li> </ul>

## Question 1 (a)

- 1 On his first day as the new manager of Marigold Day Centre, James is checking that all the health and safety policies and procedures are up to date.

James is concerned to find that there is no first aid policy and the staff have not received any first aid training for a long time.

- (a) Identify which **one** of the staff and service user's rights has **not** been supported at the Day Centre.

..... [1]

Most candidates answered this correctly.

The common incorrect responses were 'care', 'safety' or just 'protection'.

## Question 1 (b)

- (b) State **three** examples of information that James should include in a first aid policy.

- 1 .....
- 2 .....
- 3 .....

[3]

'First Aid Policy' is the first procedure listed on the specification in section 4.3

Candidates did not appear to notice they had to state 'three examples of information' and just focused their answers on doing 'First Aid'. Many commented on how to do CPR, how to clean cuts and how to treat various other medical conditions. It was evident that many candidates did not know what would be included in a First Aid Policy and just wrote about first aid, stating first aid boxes should be everywhere and listed what they should include.

A good response, for example could refer to who the trained first aiders are, where the first aid kits are, and who has additional training, e.g. asthma, EpiPen procedures and CPR.

## Question 1 (c)

(c) James organises first aid training for his staff.

Identify and explain **three** different reasons for day centre staff being trained in first aid.

Reason 1 .....

.....

.....

Reason 2 .....

.....

.....

Reason 3 .....

.....

.....

[6]

Most candidates gained some marks for this question, they did, however, miss the opportunity to gain more marks by not developing the reason they had given. See exemplar one below.

Very few candidates were aware that it is a legal requirement to have first aid trained member(s) of staff present in a care setting.

### Exemplar 1

Reason 1 one reason that staff should be trained in first aid.....  
is so they know what to do when someone gets injured.....  
for example how to bandage a cut.....

Exemplar 1 shows a developed answer worth 2 marks.

It starts with a clear reason that ends in 'so they know what to do' which is worth 1 mark.

The answer is then developed with additional explanation 'for example how to bandage a cut' worth another mark.

### Question 1 (d)

- (d) James is appointing some new staff. The DBS checks show that one of the applicants is on the 'Barred List'.

Describe what being on the 'Barred List' means.

.....

.....

.....

..... [3]

The full range of marks were seen for this question. Most candidates had some understanding of the 'Barred List'

Most candidates had some awareness of what being on the 'Barred List' means. It is a data base of individuals considered unsuitable to work with children and vulnerable adults due to past behaviour, criminal record, gross misconduct or offences. If an individual is considered unsuitable, they are put on to the 'Barred List' which should be checked by care settings providing for children/vulnerable people

Some candidates wrote about DBS checks rather than what specifically being on the 'Barred List' means.

## Question 2 (a)

**2** Nina works at Sunny Days retirement home.

A recent inspection report for Sunny Days commented that the standard of communication used by staff could be better. Nina decides to focus on 'positioning'.

- (a)** Outline how each of the methods of positioning listed below can support effective communication with the retirement home residents.

Space

.....

.....

Height

.....

.....

Personal space

.....

.....

**[6]**

A full range of marks achieved on this question.

Height was responded to very well – impact such as intimidation was often discussed and gaining eye-contact.

Space was not as well answered as many candidates did not focus on how positioning can support effective communication. Instead, their responses focused more on the 'space' than the communication for example, not feeling cramped, able to keep your distance.



## Question 2 (b)

- (b) The inspection report for Sunny Days praised the retirement home's high standards of safety and use of PPE.

State what the abbreviation '**PPE**' stands for.

..... [1]

A majority of candidates gained the mark here.

## Question 2 (c)

- (c) State when each of the **three** items of PPE listed below would be used by care workers at Sunny Days retirement home.

Use a different example for each.

Hygiene hat

.....  
.....

Disposable gloves

.....  
.....

Face mask

.....  
.....

[3]

Well answered by most candidates. Some common responses include: Hygiene hat used when serving food, to prevent cross-contamination

Current best practice in the community, care homes, and hospitals is to wear disposable gloves for washing or bathing service users. This prevents any infection / infestation passing from service user to service provider and vice versa. Other situations are when giving and handling medication.

When coughing / having a cold – a face mask prevents spread of infection.

### Question 3 (a)

- 3 Eve is a hospital social worker. She has meetings with patients who are ready to leave hospital, but will still need some care at home.

Eve applies the person-centred values when meeting with her patients to discuss their care.

- (a) Describe **one** example for each, of how Eve could apply the person-centred values '**choice**' and '**respect**' when meeting with her patients.

Choice

.....

.....

.....

..... [2]

Respect

.....

.....

.....

..... [2]

Most candidates correctly described choice – often linking to choice of care/times of visits, etc.

Marks were sometimes lost in the 'respect' answer, with many using the word 'respect' in their answer.

Some less successful responses did not gain marks as their answers were not relevant for someone leaving hospital and/or thought that it was the hospital social worker that would be the person carrying out the care at home.

Another less successful response seen a number of times was 'giving the person a choice of whether to stay in hospital or not'.

Many candidates seemed to miss the fact that the question asked for ONE example, described (being worth 2 marks) – so they were giving more than one example, which were different, without any development.

### Question 3 (b)

(b) State **two** ways Eve can ensure '**privacy**' when having a meeting with her patients to discuss their care.

- 1 ..... [1]
- 2 ..... [1]

Generally done well by the majority of candidates. Many mentioning closing doors, use of a private room and 'need-to-know' basis.

### Question 3 (c)

(c) State **three** benefits for **hospital staff** of applying the person-centred values.

- 1 ..... [3]
- 2 .....
- 3 .....

Many candidates did not gain marks because they related their answers to the benefits for patients rather than **hospital staff**.

#### Assessment for learning



Candidates should be advised not to rush; they should read the question very carefully – read it twice.

This way they will have a better chance of producing an accurate response which will gain the marks. In this case 3 marks were lost by giving benefits for patients when it should be benefits for hospital staff.

### Question 3 (d)

- (d) Analyse the **emotional** effects on the **patients'** health and well-being if person-centred values are **not** applied by hospital staff.

.....

.....

.....

.....

.....

..... [8]

A mixed response to this question. There were many very detailed responses – stress, anger, depression, loss of confidence, disempowered were common correct answers.

Some attempts were good, but many were not. Analysis was not evident in a lot of the work. Often candidates focused on the person-centred values and not the emotional effects on the patients' health and well-being or vice versa concentrating on emotional effects and not mentioning person-centred values. Many candidates discussed social effects instead of emotional affects. Many answers were list like and not analysed. Many did not give examples within their writing. Some answered applying it to physical effects.

Candidates need to read the question carefully in order to know what is required. Time should be spent on this, to avoid losing marks by writing about the wrong things.

#### Assessment for learning



Underlining key aspects of the question can be a good way to help organise the content of the candidates answer. Also practice breaking the question down into parts: command word, focus, context, concepts, marks (marks = time), This helps to develop their approach to the longer questions such as this one.

### Question 4 (a) (i)

4

(a)

(i) State **two** reasons why access at the front entrance of care settings is restricted.

1 .....

.....

2 .....

.....

[2]

Well answered by the majority of candidates.

### Question 4 (a) (ii)

(ii) Identify **two** ways access can be restricted at the external doors of a care setting.

1 .....

2 .....

[2]

This was well answered by the majority achieving both marks.

A few candidates lost marks by suggesting, locking doors and gates.

## Question 4 (b)

(b) Explain **three** different reasons why it is important for a care setting to carry out risk assessments.

- 1 .....
- .....
- .....
- 2 .....
- .....
- .....
- 3 .....
- .....
- .....

[6]

Risk assessment is a new area for this specification. (4.3 on the specification.)

Few candidates did well on this question. There seemed to be very little understanding of what a risk assessment entails and why they are carried out. Many candidates mentioned fire drills, but not really linking to risk assessing. Some mentioned DBS checks which are not relevant.

Many candidates repeated 'safe' frequently; 'keeping everyone safe' or 'keeping environment safe'.

Question 5 (a)

5

(a) Health care and social care settings provide a range of different types of care.

Complete the table by matching the care setting with the type of care it provides.

Each type of care setting can be used **once** only. One has been done for you.

Types of care setting:  
Homeless shelter    Hospital    ~~Pharmacy~~    Social services department    Support group

Type of care provided	Care setting
Helps to protect vulnerable people from harm and abuse and supports people to live independently	
Provides emotional assistance by sharing experiences and through practical activities	
Provides hot meals, dry clothes, somewhere to sleep	
Provides medication and health advice without having to make an appointment with the doctor	Pharmacy
Provides specialised treatment for illness and disease	

[4]

Well answered, with many candidates gaining the full 4 marks.

Question 5 (b)

(b) State the meaning of the term ‘**empowerment**’.

.....  
..... [2]

Most candidates could define empowerment well. Using terms like ‘in control’, ‘confident’ and ‘independent’.

Those who gained 0 marks here often just used the word ‘powerful’.

### Question 5 (c)

(c) Describe how **service users'** needs could be met in a hospital.

.....

.....

..... [2]

Some answered this very well, looking at adaptations for disabilities, appropriate care given and dietary requirements.

Weaker candidates did not always give specific examples including things like: apply values, good communication and not specific needs that could be met.

### Question 5 (d)

(d) Describe the role of the 'Designated Safeguarding Lead' in a care setting.

.....

.....

.....

.....

.....

..... [6]

This question on the role of a Designated Safeguarding Lead (DSL) was not well answered.

Many candidates confused a DSL with a Health and Safety expert. There were vague responses such as 'keeping people safe and protected'.

Those that did answer this well, highlighted safeguarding training, reports of concerns being passed to the DSL and the DSL liaising with external agencies.



## Exemplar 2

Keeping everyone safe ~~by~~ ~~at~~ but also making sure all staff members know what they are doing and that they are confident in their work, but to also make sure that the staff are safe themselves, a Designated Safeguarding lead is someone who makes sure everything is OK and everyone is safe and well protected and none of the service users or service providers are in any form of danger or harm at work.

This is a Level 2 answer.

The candidate has given an adequate description showing sound understanding of some of the responsibilities of the DSL role. Relevant points are made, some of which have been developed.

### Question 6 (a)

6

- (a)** Tissues and antiseptic wipes are often used in care settings.

Explain how to dispose of used tissues or wipes to minimise the risk of spreading infection.

[3]

On the whole this question was well answered. Most candidates gaining at least 2 marks. The third mark often lost due to not referencing reducing the spread of infection. In these cases it was either omitted or repeated the question stem 'minimising infection'.

### Question 6 (b)

- (b)** Complete the table by matching the '6C's to an example of it in practice.

Use each of the 6Cs once or not at all. One has been done for you.

## The 6Cs:

**Care    Commitment    Communication    ~~Compassion~~    Competence    Courage**

Examples	6Cs
Always performing tasks to a high standard	
Showing empathy, support and kindness for a patient	Compassion
This is essential to develop a good understanding with service users	
Willing to speak up when concerned about poor practice	

[3]

Clear, correct responses provided, many candidates gained full marks.

Commitment was a common error instead of competence for the first response.

Most got communication and courage correct.

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